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APPLICANTS

Ulrich Dajek, Leverkusen, GERMANY;

Hubert Goldbach, Ratingen, GERMANY;

** CONTINUING DATA ***** ^{AD} NONE
 ** FOREIGN APPLICATIONS ***** ^{AD} ~~000000~~
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GERMANY	SHEETS DRAWING 5	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

34947
 LANXESS CORPORATION
 111 RIDC PARK WEST DRIVE
 PITTSBURGH, PA
 15275-1112

TITLE

Process for manufacturing a composite article

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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